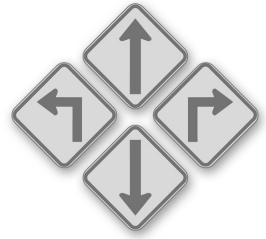
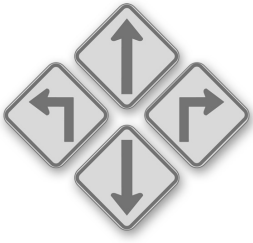


Executive Summary



A central goal of the President's New Freedom Initiative is the full participation of people with disabilities in all areas of society. Access to transportation is critical to achieve this goal. People with mental illnesses require reliable transportation to work, access services, shop, learn, worship, volunteer, and make and socialize with friends, as does everybody. However, too many mental health service consumers have unmet transportation needs due to significant barriers that exist in urban, suburban, and rural areas. These barriers can be described as the 5 A's (Adapted from the Beverly Foundation, 2004):

- 1 . **Affordability.** In addition to their mental disability, many mental health consumers face the disabling effects of poverty. Those who rely on Supplemental Security Income (SSI) or other income supports often cannot afford to own a car or even to use public transportation regularly.
- 2 . **Accessibility.** Public transit is becoming more accessible to people with physical disabilities, but many people with mental and other hidden disorders continue to have a difficult time using transit systems. Even specialized transportation programs present difficulties, such as advance scheduling requirements, that limit users' ability to get where they need to go and the freedom to do so as they choose.
- 3 . **Applicability.** In many communities, programs abound for people with unmet transportation needs, but too often, mental health consumers are not eligible. Other programs, for which they are eligible, are available only for limited purposes.
- 4 . **Availability.** Some communities offer few if any transportation solutions; many rural



communities have no public transit. In other communities, public transit schedules greatly limit when and where people can travel.

5. **Awareness.** Many mental health consumers do not know about the transportation opportunities that are available or how to use them.

While many needs remain unmet, transportation initiatives in certain communities and States have successfully addressed some of these barriers. Wider replication of these initiatives could help alleviate transportation problems elsewhere.

Some of these initiatives focus on improving people's ability to use public transit by making it more affordable or by addressing accessibility and awareness issues. Encouraging the use of public transit has many advantages: it is cost-effective, fosters independence, and encourages integration into the community. Examples of public transit initiatives include offering reduced fares, issuing transit passes, and training people to use transit independently. Of course, these initiatives work only in communities with public transit, and many communities either do not have public transit or have only limited transit services.

In areas not served by public transit, community transportation initiatives use a variety of methods to get people where they need to go. Some programs use their own vehicles; others rely on privately owned vehicles or taxis. Some employ consumers and some rely heavily on volunteer drivers. An innovative approach issues vouchers, reimbursed at a flat rate per mile, that allow people to arrange their own transportation.

Coordinating transportation resources is a new trend. Several States, including Florida and Oregon, have established systems that consolidate their transportation services to eliminate duplication and waste, and to get the most from limited resources. In February 2004, the President issued an Executive Order (No. 13330) requiring such coordination at the Federal level.

Since some communities already have many pieces of the puzzle in place, other communities and States can adopt these successful approaches. Additionally, Federal policy can have a major impact on transportation for mental health consumers by encouraging widespread access to public transit; by helping communities create solutions for serving older adults, people with disabilities, and families of low income; and by encouraging States to coordinate their human service transportation programs.

